

SEP 10 2008

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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM  (to be used for all correspondence after initial filing)	Application Number	10/584,797
	Confirmation Number	3426
	Filing Date	w/effective filing date of December 14, 2004
	First Named Inventor	Bernd DÖBELE
	Group Art Unit	3681
	Examiner Name	Dirk WRIGHT
Total No. of Pages in this Submission: 8	Attorney Docket Number	ZAHFRI P867US

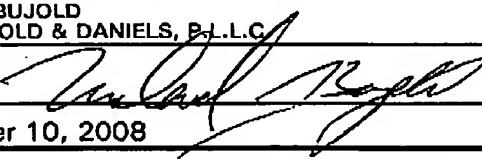
## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached - Check \$ <input checked="" type="checkbox"/> Amendment/Response - 7 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (in Duplicate) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Stmt <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) (please identify below):
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## REMARKS

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

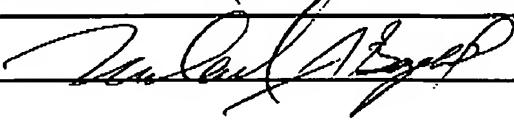
Firm or Individual Name	Michael J. BUJOLD DAVIS BUJOLD & DANIELS, P.L.L.C.	Reg. No. 32,018 CUSTOMER NO. 020210
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Signature		
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Date	September 10, 2008	
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## CERTIFICATE OF TRANSMISSION

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Signature		Date: September 10, 2008 (Lfb)
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9/10/08

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Bernd DÖBELE  
Serial no. : 10/584,797  
Confirmation No. : 3426  
Filed : with an effective filing date of December 14, 2004  
For : DRIVE DEVICE COMPRISING A GEARBOX  
Group Art Unit : 3681  
Examiner : Dirk WRIGHT  
Docket : ZAHFRI P867US

The Commissioner for Patents  
U.S. Patent & Trademark Office  
P. O. Box 1450  
Alexandria, VA 22313-1450

RESPONSE

Dear Sir:

**[XXX] NO FEES ARE PAYABLE WITH RESPECT TO THIS RESPONSE.**

In response to the official action mailed July 31, 2008, please enter the following before reconsideration of this application.

**In the Claims:**

Please amend claims 11-14 as follows in which the claim additions are shown by underlining and/or the claim deletions are shown by strikeout or brackets. Please enter the amended claims into the record of this case.